

HEPATITIS C (hep C, non-A non-B hepatitis)

What is hepatitis C?

Hepatitis C is a disease caused by the hepatitis C virus which results in infection of the liver. Hepatitis C is the most common (but not the only) cause of post-transfusion hepatitis in the United States.

Who gets hepatitis C?

Anyone can get hepatitis C, but IV drug users, transfusion recipients, and dialysis patients are at high risk of getting the infection. Health care workers who have frequent contact with blood have also been shown to be at risk.

How is the virus spread?

The hepatitis C virus is spread by contact with contaminated blood or plasma. Contaminated needles and syringes are a source of spread among IV drug users. The role of person-to-person contact and sexual activity in the spread of this disease is unclear. While spread may occur by these routes, it is less frequent than with the hepatitis B virus.

Hepatitis C virus is NOT spread through casual contact or in typical school, office, or food service settings. It is NOT spread by coughing, sneezing, or drinking out of the same glass.

What are the symptoms?

Symptoms develop slowly and may include loss of appetite, stomach pain, nausea, vomiting. Jaundice (yellowing of the skin or whites of the eyes) does not occur as commonly with hepatitis C as it does with hepatitis B. The severity of the illness can range from no symptoms to fatal cases (rare). Long-term infection is common. Liver disease may result from long-term infection, but the illness more often improves after two to three years. People who have a long term infection may or may not have symptoms. People who do not have symptoms can spread disease.

How soon do the symptoms appear?

Symptoms commonly appear within six to nine weeks. However, they can occur as soon as two weeks and as long as six months after infection.

How long can an infected person spread the virus?

Infected people may spread the virus indefinitely.

How is hepatitis C diagnosed?

A positive blood test for hepatitis C virus antibody can mean any of the following:

1. Current or acute infection - This diagnosis is usually made if a person has signs and symptoms of liver disease, blood tests showing abnormal liver function, and negative tests for hepatitis A and B.
2. Chronic carrier - A chronic carrier is a person who was infected more than 6 months prior to the positive antibody blood test. The carrier does not have signs or symptoms of liver disease although there may be abnormal liver function tests. The carrier can transmit the virus to others. Over time the virus may cause liver damage, carriers should be followed closely by a physician. If there is evidence of progressive liver damage, the patient should be referred to a doctor specializing in the treatment of liver disease.
3. Immunity - The person was infected with hepatitis C in the past but has cleared the virus from their body. The person has a positive hepatitis C antibody test, no signs or symptoms of liver disease, and normal liver function tests. The immune person cannot spread hepatitis C to anyone else, and the antibodies protect them from infection in the future.
4. False Positive Test - The blood test is not 100% accurate. Rarely, the test is positive even though the person has never been infected with hepatitis C. There is no evidence of liver disease. Repeat hepatitis C antibody tests may be negative.

How good is the blood test?

The hepatitis C test used by blood donation centers is only a screening test to eliminate hepatitis C virus from the nation's blood and plasma supply. Individuals who test positive on the hepatitis C virus antibody test should be retested using the RIBA hepatitis C test or testing for hepatitis C virus using PCR technology. These tests cannot determine whether the disease is acute or chronic.

How can hepatitis C be prevented?

Syringes, tattooing, and acupuncture needles should not be reused. Control measures against hepatitis B infection also apply. Blood banks should properly discard units of blood that are positive for the hepatitis C virus.

Where can I get more information?

- Your personal doctor
- Your local health department, listed in the telephone directory
- The Utah Department of Health, Bureau of Epidemiology (801) 538-6191

UTAH DEPARTMENT OF HEALTH
BUREAU OF EPIDEMIOLOGY
August 2001